Outdoor Education Camps



SUMMER 2007 JUNE 18-AUGUST 24 645-3615

Camps

- Indian Village Day Camp
- Camp Terra
- Teen Adventure Camp
- Camp Terra Preschool Camp
- Counselor in Training Program

www.columbusrecparks.com

REGISTRATION

Thank you for choosing Columbus Recreation and Parks. We are excited to offer so many different camps for your children. Please read over all of the registration procedures and policies. Once you have made your camp choices, fill out and send in the registration and medical forms. We are looking forward to a great summer with your child!

QUESTIONS? CALL 645-3615

Registration Procedures:

- 1. Fill out the registration and medical forms located in this brochure. For more forms, visit our website at www.columbusrecparks.com.
- 2. Mail both forms to 200 Greenlawn Avenue Columbus, OH 43223
- 3. Do not send in payment with registration form!
- 4. Once registration form is received, it will be processed and you will receive a confirmation via **E-mail**. Please allow up to four weeks for your registration to be processed.
- 5. Payment must be received within three weeks from your confirmation date.
- 6. After that date, your spot will be offered to those on the waiting list.

Registration starts March 8, 2007. We will begin accepting registration forms March 1, 2007. We cannot collect any forms before March 1. Any forms received before March 1st will be RETURNED. Only mail-in registration forms will be accepted. Dropped off registrations will be RETURNED UNOPENED. We will accept up to 2 families per envelope.

P.L.A.Y. Grants - Camp grants may be available through our Department. Call 645-3615 for more information, and to find out how to get a application.

Cancellation Policy:

In order to receive a refund, a cancellation notice and refund request must be made in writing. Please call first, and then e-mail or mail the request. A written request must be received before the refund will be processed.

- Cancellation three weeks or more prior to the start of the camp week—\$25.00 cancellation fee. Refunds will reflect the full amount of the camp fee minus the \$25.00.
- Cancellation less than three weeks, but more than one week in advance—50% refund on full amount of the week of camp
- Cancellation one week or less prior to the camp week—25% refund.

INDIAN VILLAGE

AGES 6-12 (age as of June 12th)



Discover Native American folklore & culture, explore caves, study nature, go hiking, fishing, canoeing, swimming, boating and make arts and crafts at the Recreation and Parks' most popular day camp. The activities are high energy and the kids will be active all day. Children will be divided into age groups or "tribes". All groups will participate in each activity with some activities modified for the younger campers.

Campers must provide their own lunch and snack. No refrigeration is available.

TEENS!

Wanna help at
Indian Village?

Become a Counselor-in-Training (CIT)!

CITs work alongside a counselor during camp.

See page 7 for more information.

SESSIONS	THEME	CODE
June 18-22	Waterriffic	IV-1
June 25-29	Games Galore	IV-2
July 2-6(no camp July 4)	Wildlife Discovery	IV-3
July 9-13	Native Knowledge	IV-4
July 16-20	Tribal Olympics	IV-5
July 23-27	Wateriffic	IV-6
July 30-Aug 3	Games Galore	IV-7
Aug 6-10	Wildlife Discovery	IV-8
Aug 13-17	Native Knowledge	IV-9
Aug 20-24	Tribal Olympics	IV-10

*Campers may only register for each theme once.



For More
Information
call 645-3615

HOURS & FEES

Monday - Friday 9 AM - 4 PM All campers must arrive by 9 AM

\$90 per week for Columbus Resident \$100 per week for Non-Resident

(IV-3 prices: \$72/\$80)

Early Drop-Off: 8-9 AM \$10 per week (IV-3 = \$8) Late Pick-Up: 4-6 PM \$20 per week (IV-3 = \$16)

Early Drop-Off & Late Pick-Up: \$25 per week (IV-3 = \$20)

CAMP TERRA

AGES 6-12 (age as of June 12th)

Explore nature and science through hands-on fun during this weeklong day camp. Each week campers will discover wildlife, go fishing, learn archery, go creeking, and hiking. This summer campers will either learn to canoe or be able to try out our mobile climbing wall, along with experiencing additional programming from guest speakers such as Professor Jeff (chemistry guru) and the Bug Man. The theme of the week will determine what other fun activities the campers will participate in such as roller coaster and hot air balloon making or tie dying with bugs!

Campers must provide their own lunch and snack. No refrigeration is available.



SESSIONS	THEME	CODE
June 18-22*	Slimy Skins and Scales	CT-1
June 25-29^	Wildlife Discovery	<i>C</i> T-2
July 2-6* (no camp July 4)	Nature Art	<i>C</i> T-3
July 9-13^	Incredible Invertebrates	CT-4
July 16-20*	Phantastic Physics	CT-5
July 23-27 [^]	Things with Wings	CT-6
July 30-Aug 3*	Wet and Wild	CT-7
Aug 6-10^	Phantastic Physics	CT-8
Aug 13-17*	Slimy Skins and Scales	CT-9
Aug 20-24^	Wildlife Discovery	<i>C</i> T-10

Campers may only register for each theme once.

*These weeks will have the climbing wall

^ These weeks the campers 8 and older will learn to canoe

LOCATION • HOURS • FEES

Antrim Park is Centrally located off SR315, on Olentangy River Road between Bethel Road and SR161.

Monday-Friday 9 AM-4 PM All children must arrive by 9 am

\$75 per week for Columbus Resident

\$80 per week for Non-Resident

(CT-3 prices: \$60/\$64)

Early Drop-Off: 8 - 9 AM \$10 per week (CT-3 = \$8) Late Pick-Up: 4 - 6 PM \$20 per week (CT-3 = \$16)

Early Drop-Off & Late Pick-Up \$25 per week (CT-3 = \$20)

CAMP TERRA PRESCHOOL CAMP

AGES 4 & 5 (age as of June 12th)

This camp is for the little ones! Explore nature and science through hands-on fun during this weeklong day camp. Campers will discover wildlife, learn about plants and rocks, track animals, go fishing & creeking, go hiking, and enjoy many more activities.

Campers must provide their own snack. No refrigeration is available.

SESSIONS	THEME	CODE
June 18-22	Wildlife Discovery	PK-1
June 25-29	Bug Out!	PK-2
July 2-6 (no camp July 4)	Slimy Skins and Scales	PK-3
July 9-13	Wet & Wild	PK-4
July 16-20	Bird Brainiacs	PK-5
July 23-27	Wet & Wild	PK-6
July 30- Aug 3	Bird Brainiacs	PK-7
August 6-10	Bug Out!	PK-8
August 13-17	Wildlife Discovery	PK-9
August 20-24	Slimy skins and Scales	PK-10

^{*}Campers may only register for each theme once (maximum of 5 weeks).

LOCATIONS • HOURS • FEES

Antrim Park Centrally located off SR315, on Olentangy River Road between Bethel Road and SR161.

Monday - Friday 9 AM - 12 PM All children must arrive by 9 am

\$35 per week for Columbus Resident \$40 per week for Non-Resident

(PK-3 prices: \$28/\$32)

Early Drop-Off: 8 - 9 AM \$10 per week (PK-3 = \$8)

Teen Outdoor Adventure Camp

AGES 13-15 (age as of June 12th)

Experience an amazing adventure with other teens! Have fun camping, rock climbing, rappelling, kayaking, conquering the high ropes course, making new friends, and successfully mastering a variety of team challenges.

Activities will occur at several locations within the Columbus Park System and a camp out at the Hocking Hills State Park! Each day will begin and end at Indian Village or at the Indoor Adventure Center in Franklin Park, located at 1747 East Broad Street. This is a thrilling camp you don't want to miss!

Cost: \$150 per week Columbus Residents \$165 per week Non-residents

Session

Code

Week 1 at Indian Village: June 25-June 29

TAC-1

Week 2 at the Indoor Adventure Center: July 9-July 13 TAC-2

Maximum 10 Campers per week

*Overnight on the Thursday of each week

SCHEDULE

Monday-Friday 9:00 AM - 4:00 PM All campers <u>must</u> arrive by 9 AM

Activities include:

Group teambuilding games & High Ropes Course & Kayaking ♦ Orienteering ♦ Hiking ♦ Camping ♦ Rock Climbing · Rappelling · Swimming

For More Information call 645-5972

Before and After Care*

*Only available week 1

Early Drop-Off: 8-9 AM

\$10/week

Late Pick-Up: 4-6 PM

\$20/week

Early Drop-Off & Late Pick-Up:

\$25/week

Campers must provide their own lunch and snack. No refrigeration is available.

Counselors -in -Training Program (CIT)

AGES 13-17 (age as of June 12th)

Too old to go to Camp Terra or Indian Village but still want to have fun? Then the Counselor in Training (CIT) program is for you! CITs work alongside camp counselors teaching kids, playing games, hiking, fishing, canoeing, swimming and more.



For an application, go to www.columbusrecparks.com
All applications will be due by April 20

CITs volunteer for a week at a time. You can volunteer for as many weeks as you wish!
Once interviews have taken place, we will notify you as to which weeks you have been accepted for.



For More
Information call
645-3615

CITs must provide their own lunch and snack. No refrigeration is available.

Community Recreation Council (CRC)

Who we are:

The Outdoor Education Community Recreation Council (CRC) is a group of dedicated citizens that volunteer their time to help improve the Outdoor Education Section of the Columbus Recreation and Parks department.



All you do:

- Attend 70% of our meetings throughout the year.
- Volunteer at least 20 hours of your time at various events or on various committees.

What we do:

- Fundraising for Projects such as buying Indian Village Teepees.
- Running events such as the annual Easter Egg Hunt.
- Organization of the Summer
 Camp Store and Tribe Pictures!
- Pot Luck dinners after 6 week classes

What you receive:

- Opportunity to meet your kids friends and meet other parents
- Support the program your kids love.
- Get Early Registration for Camp!

EARLY REGISTRATION for Summer Camp 2008!

For More Information and to get involved contact:

Stacey Kudza (CRC President) (614) 791-0489 skuzda@wowway.com

Registration Form

Did you atter	nd Indian Village, Tee	en Ad	dventure or Camp Terra Su	ımmer	2006? Yes No	
Child's name	e		Ag	ge	DOB	
Guardians' N	Name(s)					<u>-</u>
Address		Cit	y Zip			
Phone Numb	oer (Home)					
	(Mom Work)		(Mom Mobi	ile)		
	(Dad Work) _		(Dad Mobil	le)		
EMAIL Addi	ress (REQUIRED*) _					_
*Email is <u>re</u>	quired for confirmat	tion	purposes.			
Please place ternate choice the appropriate	the CODE of the camp e(s) in the event that yo te columns. Also enter	you our pr	Camp(s) & Week(s) wish to attend in the "Preferre eferred camp is closed out, ple appropriate letter to indicate off, B = late pick-up, C = Both	ed Cam lace the e the ea	p" column. If you le code of the alterrarly drop-off/late pi	have an al- nate camp in ck up you
	Preferred Camp Schedule CODE		Alternate 1	A	Iternate 2	
			CODE		CODE	
	СТ-1 В		IV-3 C	C	CT-6 B]
	erred Camp Schedule	(if	Alternate 1 closed out of preferred camp)	(if o	camp)	
	CODE		CODE		CODE	
				1		

Columbus Recreation and Parks Department Medical Waiver Form

I. CAMPER INFORMA	ATION		Harra Dharras	
Address:	Last Name:	Citv.	Home Phone: Zip Code: rent Grade: Cell /Pager: Cell /Pager:	
Circle One: M F Age:	Date of Birth:	Curi	rent Grade:	
Mother/Guardian Name:		Work Phone:_	Cell /Pager:	
Father/Guardian Name:		work Phone:	Ceii /Pager:	
II. EMERGENCY CON	able to be reached, cor	ntact:		
Day Phone:		Day Phone:	a Campar	=
Relationship to Camper:		Relationship to	Camper:	
III. MEDICAL INFORM Physician and/or Clinic				
Name:	, 		Phone Number:	<u> </u>
		ous Recreation ar Medical Wai	nd Parks Department ver Form	
I. CAMPER INFORM	A I ION		Home Phone:	
Address:	LUST NAME	City:	Home Phone: Zip Code: rent Grade: Cell /Pager: Cell /Pager:	
Circle One: M F Age:	Date of Birth:	Curi	rent Grade:	
Mother/Guardian Name:		work Phone:_ Work Phone:	Cell /Pager: Cell /Pager:	
			oo ugo	
II. EMERGENCY CON If parents or guardians are una	able to be reached, cor	ntact:		
Day Phone:		Name: Day Phone:		=
Relationship to Camper:		Relationship to	Camper:	
III. MEDICAL INFORMA Physician and/or Clinic Name:			_ Phone Number:	_
Dentist and/or Dental (Phone Number:	<u> </u>
Please provide specific inform asthma, etc.)			camp staff should be aware (allergies, ac	tivity restrictions,
All medication taken by partici that person is capable of takin	ipant shall be self admi ig his/her own medicati	nistered, and no plons, or parent/gua	f shall not administer medication to participarticipant on medication shall be registere ardian is available to administer the medication from the locked significant to the medication from the locked significant to the state of the medication from the locked significant to the state of the medication from the locked significant to the locked si	d in the program unless ation. Recreation staff
Please identify type, dosage Medication:			nt is currently takingFrequency:	
IV. PARTICIPANT/PA				
dental treatment for my child (and the transportation of the c prompt attention/treatment in a safety in case of an emergence bus, or its employees respons	ted phone #'s are unsu listed above) anywhere child to the nearest hos an emergency. I autho by and to administer an sible. I understand and jury occur to my child a	ccessful. I authorize/anytime should in pital reasonably activities the City of Color yneeded medicate assume all risks that this camp, I will	n to participate in all activities offered during and give my consent for any emergency to be deemed advisable by a qualified mediccessible. I understand this is to avoid uncolumbus to take all necessary steps to insuitions. In case of accident or injury I will not nat may occur during my child's participation be responsible for all medical treatment ar	y medical, surgical or cal Doctor or Dentist, due delay and to assure my child's health & hold the City of Columon in these programs. I
SIGNATURE:			DATE:	
()	parent or legal guardian)		DATE:	

Columbus Recreation and Parks Department Page 2

Camper Name				
V. PARTICIPANT AUTHORIZED Please list all escorts who are aus show identification. At no time will lowed to leave for lunch.	thorized to pick up your child.			
Name	Phone Number	Relationship to camper		
1				
2				
3				
4				
5				
6				
"I have read and understand the Signature of Parent/Gua)ate	
VII. PUBLIC RELATION	S			
Please initial one of the fo	ollowing:			
I authorize the Ci	ty of Columbus to use	my child's photograph	n for public relations pu	rposes.
-or-				
l do not authorize poses.	e the City of Columbus	to use my child's pho	otograph for public relat	ions pur-
Vehicle Release Form One of our activities here at Inchike, creek and enjoy the scen your child from Hayden Falls b tion occurs. Thank you.	ery. In event that the ponto	oon boat will not start on t	heir return we would need t	o transport
l,	, permit my o	child,		
to ride in a Columbus Recreat its employees responsible. I u				lumbus, or
		Date		

Signature of guardian